

FREEDOM OF INFORMATION ACT (FOIA) REQUEST

Name:

Company:

Mailing Address:

Phone Number:

e-mail Address:

Date of Request:

Detailed Description of Information Requested: Please be as specific as possible (file numbers, locations, addresses, parties involved, etc.) This will help to expedite your request.

Reimbursement of Expenses to Process Statement: Requestor must include a statement similar to "**I agree to pay all costs associated with the processing of this FOIA request**". (Note: Requestor should annotate if there is a specific limit on amount he/she is willing to pay and/or contact this office in advance for an estimated processing cost). The fees are as follows: \$20.00 per hour for clerical search and review and \$44.00 per hour for professional search and review. Copying costs are \$.15 for each printed side of a duplicated page and \$.25 for each printed side of microfiche copy. If you are other than a commercial requester, you will receive two free hours of search time and one hundred free pages of duplication.

Please send FOIA requests to the following:

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